

Fill in this information to identify the case:

Debtor name Suzlon Wind Energy Corp

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) 21-07923

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

☒ No. Go to Part 2.

☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

☐ No. Go to Part 3.

☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Security Deposit For Triangle Plaza Chicago, Illinois Office Lease \$400,000.00

COM ED # 3159774010	7,440
COM ED # 56271 60020	4,385
NOVA SCOTIA POWER INC	3,920
NICOR GAS 23-69-04-6195	3,844
TOWNE REALTY, INC.	26,600
LAWSON INVESTMENTS	1,500

7.2. 47,690 \$47,690.00

7.3. Commercial deposit with Chase Bank \$20,000.00

7.4. Chase Credit Cards for Insurance \$50,000.00

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8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$517,690.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11b. Over 90 days old: 450,000.00 - 225,000.00 =... \$225,000.00
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$225,000.00

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale Wind Turbine Parts: 40 Blades & Misc. parts in Corpus Crispy, Texas and Pipestone, Minnesota Rotors & electrical or mechanical parts in Elgin, Illinois and Dumas, Texas		\$0.00	Liquidation	\$500,000.00

22. **Other inventory or supplies**

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$500,000.00

24. **Is any of the property listed in Part 5 perishable?**

- ☒ No

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☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No

☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.

☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office Furniture located in Chicago & Elgin, Illinois	\$0.00	Liquidation	\$55,000.00

40. **Office fixtures**

41. **Office equipment, including all computer equipment and communication systems equipment and software**

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$55,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

☐ No

☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.

☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1.	1 Hyster Fork Lift located Pipestone, Minnesota	\$0.00	Liquidation	\$50,000.00
47.2.	2015 RAM 1500 4x4 Crew Cab - VIN 3C6RR7KT7FG711297 located Pipestone, MN	\$0.00		Unknown
47.3.	2019 Chevrolet Silverado 2500HD 4x4 crew cab - VIN 1GC1KREY4KF228200 located in Oklahoma	\$0.00		Unknown
47.4.	2019 Chevrolet Silverado 1500HD 4x4 crew cab - VIN 1GC1KREY1KF230065 located (likely) in Oregon	\$0.00		Unknown
47.5.	2017 Chevrolet Silverado 2500HD 4x4 crew cab - VIN 1GC1KUEG9HF182737 located (likely) in Arizona	\$0.00		Unknown
47.6.	2008 Ford E-350 Super Duty XLT extended wagon - VIN 1FBSS31L58DB37697 located in Illinois	\$0.00		Unknown
47.7.	2015 RAM 1500 4x4 crew cab - VIN 3C6RR7KT0FG711299 (client-owned with products) located (likely) in Canada	\$0.00		Unknown

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

Installation Tools and Equipment Located Elgin, Illinois; Pipestone, Minnesota; Port Corpus Christi, Texas and Guyton, Oklahoma \$0.00 Liquidation \$50,000.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$100,000.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☐ No

☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

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Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets Registered Trademark "Suzlon"	Unknown		\$0.00

61. Internet domain names and websites

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of debtor's interest

71. Notes receivable
Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)
Description (for example, federal, state, local)

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Name

Canadian HST and Tax refunds for 2020 Tax year 2020 \$100,000.00

State of Idaho Sales and Use Tax Refund Tax year \$27,000.00

Refund from Wyoming State Tax year \$193.00

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$127,193.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$517,690.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$225,000.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$500,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$55,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$100,000.00	
88. Real property. <i>Copy line 56, Part 9.</i>>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$127,193.00	
91. Total. Add lines 80 through 90 for each column	\$1,524,883.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$1,524,883.00

Fill in this information to identify the case:

Debtor name Suzlon Wind Energy Corp

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) 21-07923

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Amount of claim

Do not deduct the value of collateral.

Unknown

Column B

Value of collateral that supports this claim

Unknown

2.1 Enterprise Fleet Management

Creditor's Name

PO Box 800089
Kansas City, MO 64180-0089

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

2015 RAM 1500 4x4 Crew Cab - VIN
3C6RR7KT7FG711297
located Pipestone, MN

Describe the lien

Motor Vehicle Lease Agreement

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

- Check all that apply
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

2.2 Enterprise Fleet Management

Creditor's Name

PO Box 800089
Kansas City, MO 64180-0089

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

2019 Chevrolet Silverado 2500HD 4x4 crew cab
- VIN 1GC1KREY4KF228200
located in Oklahoma

Describe the lien

Motor Vehicle Lease Agreement

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Unknown

Unknown

Debtor Suzlon Wind Energy Corp Case number (if known) 21-07923

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.
- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.3 Enterprise Fleet Management

Creditor's Name

PO Box 800089
 Kansas City, MO 64180-0089

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$0.00

Unknown

2019 Chevrolet Silverado 1500HD 4x4 crew cab
 - VIN 1GC1KREY1KF230065
 located (likely) in Oregon

Describe the lien

Motor Vehicle Lease Agreement

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Is anyone else liable on this claim?

- ☒ No
☐ Yes. Fill out *Schedule H: Creditors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.4 Enterprise Fleet Management

Creditor's Name

PO Box 800089
 Kansas City, MO 64180-0089

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Unknown

Unknown

2017 Chevrolet Silverado 2500HD 4x4 crew cab
 - VIN 1GC1KUEG9HF182737
 located (likely) in Arizona

Describe the lien

Motor Vehicle Lease Agreement

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Is anyone else liable on this claim?

- ☒ No
☐ Yes. Fill out *Schedule H: Creditors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.5 Enterprise Fleet Management

Creditor's Name

PO Box 800089
 Kansas City, MO 64180-0089

Creditor's mailing address

Describe debtor's property that is subject to a lien

\$0.00

Unknown

2008 Ford E-350 Super Duty XLT extended wagon - VIN 1FBSS31L58DB37697
 located in Illinois

Describe the lien

Motor Vehicle Lease Agreement

Is the creditor an insider or related party?

- ☒ No

Debtor Suzlon Wind Energy Corp Case number (if known) 21-07923

Name

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

☐ Yes
Is anyone else liable on this claim?

☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:
Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

2.6 Exim Bank - London Branch

Creditor's Name

5th floor, 35 King Street
London EC2V 8BB
UNITED KINGDOM

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Control Account Over Accounts Generated from Operations and Maintenance Service Accounts

\$5,050,000.00

\$0.00

Describe the lien

Is the creditor an insider or related party?

☒ No
☐ Yes
Is anyone else liable on this claim?
☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:
Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

2.7 HYG Financial Services Inc.

Creditor's Name

800 Walnut Street
Des Moines, IA 50309

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$0.00

\$0.00

Describe the lien

Is the creditor an insider or related party?

☒ No
☐ Yes
Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:
Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

2.8 HYZ Financial Services, Inc

Describe debtor's property that is subject to a lien

\$0.00

\$0.00

Debtor <u>Suzlon Wind Energy Corp</u> <small>Name</small> <hr/> Creditor's Name <u>PO Box 014545</u> <u>Des Moines, IA 50306-3545</u> <hr/> Creditor's mailing address <u>notification@securemail.financialservicing.net</u> <hr/> Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	Case number (if known) <u>21-07923</u> <hr/> Describe the lien <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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2.9 <u>Tp Chicago LLC</u> <small>Creditor's Name</small> <u>40 Morris Ave, Suite 230</u> <u>BRYN MAWR</u> <u>Bryn Mawr, PA 19010</u> <hr/> <small>Creditor's mailing address</small> <hr/> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	Describe debtor's property that is subject to a lien <u>Unknown</u> <u>Unknown</u> <hr/> Describe the lien <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$5,050,000.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Chen Law Firm
c/o Gerlad Lurie
209 S. LaSalle St., Suite 950
Chicago, IL 60604

Line 2.9

Fill in this information to identify the case:

Debtor name Suzlon Wind Energy Corp

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) 21-07923

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

3D Engineered Solutions, Inc.
514 Main Street
Hull, IA 51239

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$11,164.00

3.2 Nonpriority creditor's name and mailing address

A & B Welding & Construction, Inc.
8021 199Th Avenue Nw
Elk River, MN 55330

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$156,128.00

3.3 Nonpriority creditor's name and mailing address

A Star Investments Inc
14 Havenshore Ln
Sugar Land, TX 77479

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$1,178.00

3.4 Nonpriority creditor's name and mailing address

A. W. Leil Cranes & Equipment Limit
137 Joseph Zatzman Drive
Dartmouth, Nova Scotia B3B 1W1
CANADA

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$52,229.00

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3.5	Nonpriority creditor's name and mailing address Abb Motors And Mechanical Inc 5711 R.S. Boreham Jr Street Fort Smith, AR 72901 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,236.48
3.6	Nonpriority creditor's name and mailing address Abex Infoway (Europe) Ltd. Unit-1 Sherbourne House, 25 Northol Harrow, Middlesex HA2 0LH ENGLAND Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,195.00
3.7	Nonpriority creditor's name and mailing address Adolf Thies Gmbh And Co Kg Haupstr, 76 Gottingen, Germany 37083 GERMANY Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59,559.00
3.8	Nonpriority creditor's name and mailing address Ae- Rotor Holding Bv Hengelo(Ov) The Netherlands Utrecht, The Netherlands 9999 AA THE NETHERLANDS Date(s) debt was Incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$172,206.00
3.9	Nonpriority creditor's name and mailing address Agriwind Holdings, LLC 549 South Street Quincy, MA 01269 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,468.00
3.10	Nonpriority creditor's name and mailing address Allied Electronics, Inc. 7151 Jack Newell Blvd S Fort Worth, TX 76118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,868.00
3.11	Nonpriority creditor's name and mailing address Alltite Inc 1600 East Murdock Wichita, KS 67214-3477 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,250.00

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3.12	Nonpriority creditor's name and mailing address Altura Wind Services LLC 1219 E Broadway Street Sweetwater, TX 79556 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95,900.00
3.13	Nonpriority creditor's name and mailing address American Repair Technology LLC 12206 North Burntwater Road Fort McDowell, AZ 85264 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,500.00
3.14	Nonpriority creditor's name and mailing address Amsoil Inc 925 Tower Ave Superior, WI 54880 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,852.00
3.15	Nonpriority creditor's name and mailing address Amsoil Inc 4148 Solutions Center Chicago, IL 60677 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.16	Nonpriority creditor's name and mailing address Andy Cukurs 404 South Dryden Place Arlington Heights, IL 60005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.17	Nonpriority creditor's name and mailing address Applications International Corporat 10920 Via Frontera San Diego, CA 92127 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,000.00
3.18	Nonpriority creditor's name and mailing address Aramark Refreshment Service 1851 Howard Street Elk Grove Village, IL 60007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$624.38

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3.19	Nonpriority creditor's name and mailing address Arcosa, Inc. 500 N. Akard Street Suite 400 Dallas, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.20	Nonpriority creditor's name and mailing address Arizona Department of Revenue PO Box 29079 Phoenix, AZ 85038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.21	Nonpriority creditor's name and mailing address Atomic Industrial Machine, Inc 365 Kent Avenue Elk Grove Village, IL 60007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,780.00
<hr/>			
3.22	Nonpriority creditor's name and mailing address Ats Specialized Inc. 725 Opportunity Drive Saint Cloud, MN 56301-5886 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,000.00
<hr/>			
3.23	Nonpriority creditor's name and mailing address Auxilius Heavy Industries 10 Tall Oak Lane West Lafayette, IN 47906 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,745.00
<hr/>			
3.24	Nonpriority creditor's name and mailing address Avanti Wind Systems, Inc 11311 West Forest Home Avenue Franklin, WI 53132 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,142.00
<hr/>			
3.25	Nonpriority creditor's name and mailing address Barr Fabrication Field Svc, LLC 4501 Danhill Drive Brownwood, TX 76801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,998.00

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3.26	Nonpriority creditor's name and mailing address Bartlett Bearing Co, Inc 10901 Decatur Road Philadelphia, PA 19154 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,908.00
<hr/>			
3.27	Nonpriority creditor's name and mailing address Baumer Ltd 122 Spring Street C6 Southington, CT 06489 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,335.00
<hr/>			
3.28	Nonpriority creditor's name and mailing address Birlasoft Solutions, Inc 399 Thornall Street Edison, NJ 08837 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,448.00
<hr/>			
3.29	Nonpriority creditor's name and mailing address Blue Cross Blue Shield Of Illinois Box 891134 1501 N. Plano Rd Richardson, TX 75081 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$94,425.00
<hr/>			
3.30	Nonpriority creditor's name and mailing address Bonfiglioli Usa Inc Po Box 772429 Detroit, MI 48277-2429 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$576.00
<hr/>			
3.31	Nonpriority creditor's name and mailing address Borsheim Builders Supply Inc. 857 Main Ave. West PO Box 678 West Fargo, ND 58078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.32	Nonpriority creditor's name and mailing address Borsheim Crane Service LLC PO Box 678 West Fargo, ND 58078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$265,803.00

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3.33	Nonpriority creditor's name and mailing address Bragg Crane Service 6251 Paramount Blvd Long Beach, CA 90805 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <u>\$316,429.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address Centa Corporation 511 West Freshwater Way Milwaukee, WI 53204 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <u>\$25,980.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address Centerpoint Energy - 8000054865-3 PO Box 4671 Houston, TX 77210-4671 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <u>\$3,490.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address Challenger, Gray & Christmas Inc 150 South Wacker Drive Chicago, IL 60606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <u>\$750.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Nonpriority creditor's name and mailing address Chase Business Credit Card PO Box 15918 Mail Suite DE1-1404 Wilmington, DE 19850 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <u>\$194.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address Choctaw-Kaul Distribution 3540 Vinewood Street Detroit, MI 48208-2363 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <u>\$10,851.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address Cintas Corporation Po Box 625737 Cincinnati, OH 45262-5737 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <u>\$3,626.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.40	Nonpriority creditor's name and mailing address City Of Guymon 219 N.W. 4Th Street Guymon, OK 73942-4798 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
<hr/>			
3.41	Nonpriority creditor's name and mailing address Cle Power 3240 Oakwood Lane Westlake, OH 44145 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,693.00
<hr/>			
3.42	Nonpriority creditor's name and mailing address Clearfreight Inc. 1960 E. Grand Ave., Suite 700 El Segundo, CA 90245 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,535.00
<hr/>			
3.43	Nonpriority creditor's name and mailing address Cohnreznick Llp 3560 Lenox Road Northeast Atlanta, GA 30326-4276 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,000.00
<hr/>			
3.44	Nonpriority creditor's name and mailing address Cojo Industrial Sales 605 Ne 4Th Street Guymon, OK 73942 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.45	Nonpriority creditor's name and mailing address Com Ed 1N301 Swift Rd Lombard, IL 60148 Date(s) debt was incurred ____ Last 4 digits of account number <u>0020</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,762.00
<hr/>			
3.46	Nonpriority creditor's name and mailing address Com Ed 1N301 Swift Road Lombard, IL 60148 Date(s) debt was incurred ____ Last 4 digits of account number <u>4010</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,223.00

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3.47	Nonpriority creditor's name and mailing address Comfort Suites - Elgin 2480 Bushwood Drive Elgin, IL 60124 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,862.00
<hr/>			
3.48	Nonpriority creditor's name and mailing address Composites One, LLC 85 West Algonquin Road Arlington Heights, IL 60005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,223.00
<hr/>			
3.49	Nonpriority creditor's name and mailing address Composites One, LLC 4526 Payshere Circle Chicago, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,223.00
<hr/>			
3.50	Nonpriority creditor's name and mailing address Concur Technologies Inc 18400 Ne Union Hill Road Redmond, WA 98052 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,536.42
<hr/>			
3.51	Nonpriority creditor's name and mailing address Cooke Electrical Contracting, Inc 1000 North Forest Amarillo, TX 79106 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,075.00
<hr/>			
3.52	Nonpriority creditor's name and mailing address Corporate Tax PO Box 750260 Topeka, KS 66699-0260 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.53	Nonpriority creditor's name and mailing address Coyote Logistics, LLC 2545 West Diversy Ave Chicago, IL 60647 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$163,844.00

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3.54	Nonpriority creditor's name and mailing address Crst Malone Inc 1901 Floyd Bradford Road Trussville, AL 35173 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,537.00
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3.55	Nonpriority creditor's name and mailing address Dale Barber 10175 Fm 3138 Channing, TX 79018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,750.00
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3.56	Nonpriority creditor's name and mailing address Delaware Division of Revenue 820 N. French Street Wilmington, DE 19801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.57	Nonpriority creditor's name and mailing address Delta Dental Of Illinois - Asc 111 Shuman Blvd Naperville, IL 60563 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,159.00
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3.58	Nonpriority creditor's name and mailing address Demag Cranes & Components Corp 29201 Aurora Road Solon, OH 44139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,643.00
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3.59	Nonpriority creditor's name and mailing address Dickinson, Mackaman, Tyler & Hagen Suite 1600 699 Walnut Street Des Moines, IA 50309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
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3.60	Nonpriority creditor's name and mailing address Digging & Rigging, Inc. 6037 Buffalo Road Mt. Airy, MD 21770 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$325,230.00
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3.61	Nonpriority creditor's name and mailing address Enterprise Fleet Services PO Box 800089 Kansas City, MO 64180-0089 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$106,636.00
<hr/>			
3.62	Nonpriority creditor's name and mailing address Esm Energie- Und Schwingungstechnik Energiestra e 1, Heppenheim Heppenheim, Hesse, 64646 GERMANY Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$118.00
<hr/>			
3.63	Nonpriority creditor's name and mailing address Evans Enterprises, Inc 2999 East Ainsworth Street Pasco, WA 99301 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,920.00
<hr/>			
3.64	Nonpriority creditor's name and mailing address Exelon Wind Llc 300 Exelon Way Kennett Square, PA 19348 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,310.00
<hr/>			
3.65	Nonpriority creditor's name and mailing address Exxonmobil Oil Corp 800 Bell Street Houston, TX 77002 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54,049.00
<hr/>			
3.66	Nonpriority creditor's name and mailing address Fastenal / Na 250 Sundown Road South Elgin, IL 60177 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$523.00
<hr/>			
3.67	Nonpriority creditor's name and mailing address Fedex Trade Networks 6075 Poplar Ave., Suite 300 3rd Floor Memphis, TN 38119 Date(s) debt was incurred _____ Last 4 digits of account number <u>6314</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.68	Nonpriority creditor's name and mailing address Flender Corporation 1401 Madeline Lane Elgin, IL 60124 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,983.00
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3.69	Nonpriority creditor's name and mailing address Flodyne/Hydradyne 1000 Muirfield Drive Hanover Park, IL 60133 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,809.00
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3.70	Nonpriority creditor's name and mailing address Franchise Tax Board PO Box 942857 Sacramento, CA 94257-0500 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.71	Nonpriority creditor's name and mailing address Freeborn & Peters, LLP 311 South Wacker Drive Chicago, IL 60606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,016.00
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3.72	Nonpriority creditor's name and mailing address Golden Precision Products P Ltd Wadaia Mumbai, Maharashtra, 400031 INDIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$402.00
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3.73	Nonpriority creditor's name and mailing address Grant County PO Box 8809 Minneapolis, MN 55408 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.74	Nonpriority creditor's name and mailing address Groot, Inc 1330 Gasket Drive Elgin, IL 60120-7543 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$702.00
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3.75	Nonpriority creditor's name and mailing address Guardian Insurance 550 W. Jackson, 8Th Floor Chicago, IL 60661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,670.00
<hr/>			
3.76	Nonpriority creditor's name and mailing address H & N Electric 4224 East B Street Pasco, WA 99301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,083.00
<hr/>			
3.77	Nonpriority creditor's name and mailing address Hailo, LLC 1395 Mineral Spring Road Elberton, GA 30635 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,934.00
<hr/>			
3.78	Nonpriority creditor's name and mailing address Hartley County Appraisal District PO Box 405 Hartley, TX 79044-0405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,720.00
<hr/>			
3.79	Nonpriority creditor's name and mailing address Harvest Energy Services, Inc 500 Zang Street Broomfield, CO 80021 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150,970.00
<hr/>			
3.80	Nonpriority creditor's name and mailing address Helukabel USA 1201 Wesemann Drive West Dundee, IL 60118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,393.00
<hr/>			
3.81	Nonpriority creditor's name and mailing address Hitachi Chemical Energy Technology 4008 Clay Avenue Haltom City, TX 76117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$128,789.00

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3.82	Nonpriority creditor's name and mailing address Hocking International Laboratories PO Box 462785 Escondido, CA 92046-2785 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,601.00
3.83	Nonpriority creditor's name and mailing address Hydac Technology Corp 2260 City Line Road Bethlehem, PA 18017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79,175.00
3.84	Nonpriority creditor's name and mailing address Hytorc - Division Of Unex Corp 333 Route 17 North Mahwah, NJ 07430 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,605.00
3.85	Nonpriority creditor's name and mailing address Idaho State Tax Commission PO Box 56 Boise, ID 83756-0056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.86	Nonpriority creditor's name and mailing address Illinois Department of Revenue PO Box 19006 Springfield, IL 62794-9006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.87	Nonpriority creditor's name and mailing address Indiana Department of Revenue PO Box 7087 Indianapolis, IN 46207-7087 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.88	Nonpriority creditor's name and mailing address Ingeteam Power Technology, Sa Parque Tecnologico De Bizkaia Zamudio 48170 SPAIN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$171,402.00

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3.89	Nonpriority creditor's name and mailing address Integrated Power Services LLC 3 Independence Pointe Greenville, SC 29615 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72,899.00
<hr/>			
3.90	Nonpriority creditor's name and mailing address Internal Revenue Service Ogden Service Center Ogden, UT 84201-0059 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.91	Nonpriority creditor's name and mailing address Iowa Income Tax Document Processing PO Box 9187 Des Moines, IA 50306-9187 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.92	Nonpriority creditor's name and mailing address Ipfs Corporation 24722 Network Place Chicago, IL 60673-1247 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$89,077.00
<hr/>			
3.93	Nonpriority creditor's name and mailing address Ixys Semiconductor GmbH Lampertheim, Germany 68623 GERMANY Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,013.00
<hr/>			
3.94	Nonpriority creditor's name and mailing address Jensen Crane Services 5550 Ne 22Nd Street Des Moines, IA 50313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$170,010.00
<hr/>			
3.95	Nonpriority creditor's name and mailing address K H Law, Llc 225 West Washington Chicago, IL 60606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,220.00

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3.96	Nonpriority creditor's name and mailing address Kluber Lubrication NA LP 32 Industrial Drive Londonderry, NH 03053 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,568.00
<hr/>			
3.97	Nonpriority creditor's name and mailing address Knorr Tec Kapellenbergstrasse 34, Beratzhausen Regensburg, Bavaria, 93176 GERMANY Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
<hr/>			
3.98	Nonpriority creditor's name and mailing address Konica Minolta 21146 Network Place Chicago, IL 60673-1211 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,525.00
<hr/>			
3.99	Nonpriority creditor's name and mailing address Konica Minolta Business (Cad) 3450 Superior Court, Unit 1 Oakville, Ontario L6L 0C4 CANADA Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,005.00
<hr/>			
3.100	Nonpriority creditor's name and mailing address Konica Minolta Business Solutions U Dept Ch 19188 Palatine, IL 60055-9188 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.101	Nonpriority creditor's name and mailing address Ktr Corporation 122 Anchor Road Michigan City, IN 46360 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,015.00
<hr/>			
3.102	Nonpriority creditor's name and mailing address Lapp Systems Usa, Inc. 29 Hanover Road Florham Park, NJ 07932 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,040.00

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3.103	Nonpriority creditor's name and mailing address Lawson Investments PO Box 187 Stanberry, MO 64489 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
3.104	Nonpriority creditor's name and mailing address Lewis Brisbois Bisgaard & Smith Suite 4000 633 West 5Th Street Los Angeles, CA 90071 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00
3.105	Nonpriority creditor's name and mailing address Lincoln Industrial Corporation One Lincoln Way Saint Louis, MO 63120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,689.00
3.106	Nonpriority creditor's name and mailing address Lockton Companies, LLC 444 West 47Th Street Kansas City, MO 64112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$337.00
3.107	Nonpriority creditor's name and mailing address Logmein Usa, Inc 320 Summer Street Boston, MA 02210 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,618.00
3.108	Nonpriority creditor's name and mailing address Lowis & Gellen, LLP 175 West Jackson Boulevard Chicago, IL 60604 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.109	Nonpriority creditor's name and mailing address Lti Motion Gmbh Gewerbestraße 5-9 Lahnau, Hesse, 35633 GERMANY Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,373.00

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3.110	Nonpriority creditor's name and mailing address Lund & Sorensen A/S Maserativej 4 Vejle, Denmark 7100 DENMARK Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,435.00
<hr/>			
3.111	Nonpriority creditor's name and mailing address M C Cattle Company 417 Main Ave. Gruver, TX 79040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,300.00
<hr/>			
3.112	Nonpriority creditor's name and mailing address Marshall Wind Farm LLC et al. N4145 County Road D Arkansaw, WI 54721 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$129,997.10
<hr/>			
3.113	Nonpriority creditor's name and mailing address Maxim Crane Works 4389 Solutions Center Chicago, IL 60677-4003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400,687.00
<hr/>			
3.114	Nonpriority creditor's name and mailing address Medavie Blue Cross 644 Main Street Moncton, New Brunswick E1C 8L3 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,737.00
<hr/>			
3.115	Nonpriority creditor's name and mailing address Mersen Canada Dn Ltd. 225 Harwood Blvd. VAUDREUIL-DORION, Quebec, J7V 1Y3 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,253.00
<hr/>			
3.116	Nonpriority creditor's name and mailing address Midpoint Bearing 1155 West Brooks Street ONTARIO 91762-0000 CA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,103.00

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3.117	Nonpriority creditor's name and mailing address Minnesota Revenue 600 N. Robert St. Saint Paul, MN 55146 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.118	Nonpriority creditor's name and mailing address Missouri Department of Revenue PO Box 700 Jefferson City, MO 65105-0700 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.119	Nonpriority creditor's name and mailing address Mobile Solids Solutions 208 West Mud Pike Rockwood, PA 15557 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,000.00
<hr/>			
3.120	Nonpriority creditor's name and mailing address Molded Fiber Glass South Dakota 1401 North Brown County 19 Aberdeen, SD 57401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,143.00
<hr/>			
3.121	Nonpriority creditor's name and mailing address Moog Inc 2200 South Main Street Blacksburg, VA 24060 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,000.00
<hr/>			
3.122	Nonpriority creditor's name and mailing address Moore County and Entities Collected by Moore County PO Box 616 Dumas, TX 79029 Date(s) debt was incurred ____ Last 4 digits of account number <u>1557</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.123	Nonpriority creditor's name and mailing address Moore County Tax Assessor Dumas, TX 79029-0616 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,922.00

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3.124	Nonpriority creditor's name and mailing address Morgan Am&T Po Box 1056 Greenville, SC 29602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$69,627.00
3.125	Nonpriority creditor's name and mailing address Motion Industries, Inc. Po Box 98412 Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,424.00
3.126	Nonpriority creditor's name and mailing address Mountain Crane Service 393 South 2650 West Salt Lake City, UT 84104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,673.00
3.127	Nonpriority creditor's name and mailing address Moventas Gears Canada Ltd 1615 Bishop Street North Cambridge, Ontario N1R 7J4 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,961.00
3.128	Nonpriority creditor's name and mailing address Msdsonline, Inc. 27185 Network Place Chicago, IL 60673-1271 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.129	Nonpriority creditor's name and mailing address Mubea Precision Springs, Inc 6800 Industrial Road Florence, KY 41042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,880.00
3.130	Nonpriority creditor's name and mailing address N.W. Crane Service Inc 81342 Liberty Lane Hermiston, OR 97838 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54,120.00

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3.131	Nonpriority creditor's name and mailing address Ness & Campbell Crane Inc 5730 Ne 138Th Ave Portland, OR 97230 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,635.00
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3.132	Nonpriority creditor's name and mailing address Nickel Construction, Inc. 36821 575Th Ave Mountain Lake, MN 56159 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$377.00
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3.133	Nonpriority creditor's name and mailing address Nicor Gas 23-69-04-6195 1844 Ferry Road Naperville, IL 60563-9600 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.134	Nonpriority creditor's name and mailing address Norlen Inc 900 Grossman Drive Schofield, WI 54476 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,720.00
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3.135	Nonpriority creditor's name and mailing address Northwest Crane Service, LLC 1125 40Th Street Woodward, OK 73801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$255,385.00
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3.136	Nonpriority creditor's name and mailing address Northwest Logistics Park Portfolio 1827 Walden Office Square Suite 590 Schaumburg, IL 60173 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137	Nonpriority creditor's name and mailing address Norton Rose Fulbright Us LLP 2200 Ross Avenue Dallas, TX 75201-7932 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140,042.00
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3.138	Nonpriority creditor's name and mailing address Nova Scotia Power Inc Halifax, Nova Scotia, B3J 2V7 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,920.00
3.139	Nonpriority creditor's name and mailing address Novo Advisors, LLC 5253 East Bayaud Avenue Denver, CO 80246 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,000.00
3.140	Nonpriority creditor's name and mailing address Nrg Systems 110 Riggs Road Hinesburg, VT 05461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,114.00
3.141	Nonpriority creditor's name and mailing address Office of State Tax Commissioner 600 E. Boulevard Ave. Dept. 127 Bismarck, ND 58505-0599 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.142	Nonpriority creditor's name and mailing address Oklahoma Tax Commission 300 N. Broadway Ave Oklahoma City, OK 73194 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.143	Nonpriority creditor's name and mailing address Oregon Department of Revenue PO Box 14790 Salem, OR 97309-0470 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.144	Nonpriority creditor's name and mailing address Panasonic Corporation 1707 North Randall Road Elgin, IL 60123 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$811.00

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3.145	Nonpriority creditor's name and mailing address Panhandle Steel Erectors Inc PO Box 31270 Amarillo, TX 79120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$186,950.00
<hr/>			
3.146	Nonpriority creditor's name and mailing address Pennsylvania Department of Revenue PO Box 280427 Harrisburg, PA 17128-0427 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.147	Nonpriority creditor's name and mailing address Pepperl + Fuchs, Inc 1600 Enterprise Parkway Twinsburg, OH 44087 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,640.00
<hr/>			
3.148	Nonpriority creditor's name and mailing address Port Corpus Christi 222 Power St. Corpus Christi, TX 78401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
<hr/>			
3.149	Nonpriority creditor's name and mailing address Porte Brown LLC 845 Oakton Elk Grove Village, IL 60007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,980.00
<hr/>			
3.150	Nonpriority creditor's name and mailing address Power Climber Wind 365 Upland Drive Tukwila, WA 98188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,342.00
<hr/>			
3.151	Nonpriority creditor's name and mailing address Precision Mechanical Inc 12539 Holiday Drive, Unit A Alsip, IL 60803-3255 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,716.00

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3.152	Nonpriority creditor's name and mailing address Psi Repair Services, Inc. 11900 Mayfield Livonia, MI 48150 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,250.00
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3.153	Nonpriority creditor's name and mailing address R & R Express, Inc 3 Crafton Square Pittsburgh, PA 15205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,784.00
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3.154	Nonpriority creditor's name and mailing address Renew Energy Maintenance, LLC 2520 East River Ridge Place Sioux Falls, SD 57103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,635.00
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3.155	Nonpriority creditor's name and mailing address Renewable Power Generation, LLC 10 South Dearborn Street Chicago, IL 60603 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$178,755.00
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3.156	Nonpriority creditor's name and mailing address Restricted Article Specialists, Inc 1033 Fairway Drive Bensenville, IL 60106 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$296.00
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3.157	Nonpriority creditor's name and mailing address Rimboosh Logistics Ltd 815 Boulevard De La Carriere Gatineau, Quebec J8Y 6T4 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$245.00
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3.158	Nonpriority creditor's name and mailing address Ripley Transportation Company, Inc. 102 N Gorman Ave Litchfield, MN 55355 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,960.00
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3.159	Nonpriority creditor's name and mailing address Ritz Safety LLC 755 West Smith Road Suite C Medina, OH 44256 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$461.00
3.160	Nonpriority creditor's name and mailing address Rms Cranes, LLC 1961 East 64Th Avenue Denver, CO 80229 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$75,140.00
3.161	Nonpriority creditor's name and mailing address Robert Half International, Inc 2613 Camino Ramon San Ramon, CA 94583 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,220.00
3.162	Nonpriority creditor's name and mailing address Rocky Mountain Crane Service 135 Crane Lane Salida, CO 81201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,000.00
3.163	Nonpriority creditor's name and mailing address Safety-Kleen Systems, Inc. 42 Longwater Drive Norwell, MA 02061-9149 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,105.00
3.164	Nonpriority creditor's name and mailing address SAP Concur (Philippines) Inc. Alphaland Southgate Tower, Chino Roces Ext cor EDSA, Magallane Makati City 1213 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.165	Nonpriority creditor's name and mailing address Scada International, Inc 319 Sw Washington Street Portland, OR 97204 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,800.00

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3.166	Nonpriority creditor's name and mailing address Schain Banks Kenny & Schwartz 70 West Madison Street Chicago, IL 60602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.167	Nonpriority creditor's name and mailing address Schenker Inc 150 Albany Avenue Freeport, NY 11520 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$928.00
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3.168	Nonpriority creditor's name and mailing address Schuette Metals Wausau, WI 54402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,800.00
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3.169	Nonpriority creditor's name and mailing address Secretary of State 501 South 2nd St., Room 350 Springfield, IL 62756 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.170	Nonpriority creditor's name and mailing address SELM c/o Navitas Mgmnt. Services Navitas House , Robinson Lane Floreal , Mauritius Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,357,825.00
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3.171	Nonpriority creditor's name and mailing address Seyfarth Shaw LLP 233 South Wacker Drive Chicago, IL 60606-6448 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,461.00
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3.172	Nonpriority creditor's name and mailing address Seyfarth Shaw LLP 3807 Collections Center Drive Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.173	Nonpriority creditor's name and mailing address Sgs North America Inc. 101 Corporate Place Vallejo, CA 94590 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,790.00
<hr/>			
3.174	Nonpriority creditor's name and mailing address Sioux Valley Energy Po Box 216 Colman, SD 57017-0216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.175	Nonpriority creditor's name and mailing address Skf Usa Inc Po Box 352 Lansdale, PA 19446-0352 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,666.00
<hr/>			
3.176	Nonpriority creditor's name and mailing address Skylotec North America LP 4845 Pearl East Circle Boulder, CO 80301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,387.00
<hr/>			
3.177	Nonpriority creditor's name and mailing address Sleeping Bear LLC 211 Carnegie Center Princeton, NJ 08540 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$413,827.00
<hr/>			
3.178	Nonpriority creditor's name and mailing address Smart Blade GMBH Zuppingerstrasse 14 Ravensburg, Upper Swabia, 88213 GERMANY Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,413.00
<hr/>			
3.179	Nonpriority creditor's name and mailing address Softwareone, Inc 20875 Crossroads Circle Waukesha, WI 53186-4052 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$340.00

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3.180	Nonpriority creditor's name and mailing address South Dakota Department of Revenue 445 E. Capitol Avenue Pierre, SD 57501-3185 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.181	Nonpriority creditor's name and mailing address Standard Electric Supply 1400 Michael Drive Wood Dale, IL 60191 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$145,704.00
<hr/>			
3.182	Nonpriority creditor's name and mailing address State Comptroller - Texas 111 E. 17Th Street Austin, TX 78774-0100 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,000.00
<hr/>			
3.183	Nonpriority creditor's name and mailing address State of Washington Department of Revenue PO Box 47464 Olympia, WA 98501-7464 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.184	Nonpriority creditor's name and mailing address Steiner Electric Company 1250 Touhy Avenue Elk Grove Village, IL 60007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,125.00
<hr/>			
3.185	Nonpriority creditor's name and mailing address Stemmann Technik GMBH Schuttorf, Germany 48465 GERMANY Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$127,618.00
<hr/>			
3.186	Nonpriority creditor's name and mailing address Sunbelt Rentals, Inc 2341 Deerfield Drive Fort Mill, SC 29715 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,517.00

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3.187	Nonpriority creditor's name and mailing address Suzlon Energy A/S Bredskifte Alle 13 8210 Arhus V Denmark CVR - nr 28101120 DENMARK Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,999,407.00
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3.188	Nonpriority creditor's name and mailing address Suzlon Energy Limited 633 Hadapsar Haveli Taluka Pune, Maharashtra 411028 INDIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$237,089.00
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3.189	Nonpriority creditor's name and mailing address Suzlon Energy Limited Karumathampatti, Coimbatore, Tamil Nadu, 641659 INDIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.190	Nonpriority creditor's name and mailing address Suzlon Energy Limited Nalsal, Padubidri - Karkala Road Post Padubidri, Karnataka 571111 INDIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.191	Nonpriority creditor's name and mailing address Suzlon Energy Limited Post: Padubidri, Udupi, Karnataka 574111 INDIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.192	Nonpriority creditor's name and mailing address Suzlon Energy Ltd. "Suzlon", 5, Shrimali Society, Ahmedabad, 380009 INDIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.193	Nonpriority creditor's name and mailing address Suzlon Generators Ltd . Chakan Ind. Area, Vill: Mahalunge, T Pune, Maharashtra 410501 INDIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$423,940.00
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3.194	Nonpriority creditor's name and mailing address Suzlon Global Services Limited Mumbai, India 400021 INDIA Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$116,214.00
<hr/>			
3.195	Nonpriority creditor's name and mailing address Svendborg Brakes Usa LLC 8955 S. Ridgeline Blvd - Suite 1200 Highlands Ranch, CO 80129 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,405.00
<hr/>			
3.196	Nonpriority creditor's name and mailing address Tableau Software, Inc 1621 North 34Th Street Seattle, WA 98103 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
<hr/>			
3.197	Nonpriority creditor's name and mailing address Taxation Revenue & New Mexico 1100 South St. Francis Drive Santa Fe, NM 87505 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.198	Nonpriority creditor's name and mailing address Tetra Tech, Inc 3475 East Foothill Blvd Pasadena, CA 91107 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,407.00
<hr/>			
3.199	Nonpriority creditor's name and mailing address Texas Comptroller of Public Account PO Box 13528 Capitol Station Austin, TX 78711-3528 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.200	Nonpriority creditor's name and mailing address Texas County Treasurer PO Bo 509 Guymon, OK 73942 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,286.00

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3.201	Nonpriority creditor's name and mailing address Texas County Treasurer PO Box 509 Guymon, OK 73942 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.202	Nonpriority creditor's name and mailing address Tgm Land Development, L.L.C. 3101 Castle Rock Road Oklahoma City, OK 73120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,900.00
3.203	Nonpriority creditor's name and mailing address Third Coast Underwriters Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,233.00
3.204	Nonpriority creditor's name and mailing address Tlf Northwest Corporate Park X, Llc 62302 Collections Center Drive Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$203,035.00
3.205	Nonpriority creditor's name and mailing address Todd Mortellaro 1714 South Chesterfield Arlington Heights, IL 60005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,000.00
3.206	Nonpriority creditor's name and mailing address Torgerson Farms Partnership Ethridge, MT 59435 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,411.00
3.207	Nonpriority creditor's name and mailing address Towne Realty, Inc. 710 North Plankinton Avenue Milwaukee, WI 53203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,600.00

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3.208	Nonpriority creditor's name and mailing address Transaction Tax Resources, Inc 3850 Northeast Three Mile Lane McMinnville, OR 97128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
3.209	Nonpriority creditor's name and mailing address Transgroup Express, LLC 18850 8Th Avenue South Seattle, WA 98148 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,094.00
3.210	Nonpriority creditor's name and mailing address Uhy Advisors Mo, Inc 15 Sunnen Drive Saint Louis, MO 63143 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.211	Nonpriority creditor's name and mailing address Unifirst Holdings, L.P. 4210 S.E. 22Nd Ave. Amarillo, TX 79103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,709.00
3.212	Nonpriority creditor's name and mailing address Unishippers 935 National Parkway Schaumburg, IL 60173 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$478,374.00
3.213	Nonpriority creditor's name and mailing address Upe, Inc 3401 Brecksville Road Richfield, OH 44286 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,220.00
3.214	Nonpriority creditor's name and mailing address Ups Lockbox 577 Carol Stream, IL 60132-0577 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.215</div> <p>Nonpriority creditor's name and mailing address Utah State Tax Commission 210 North 1950 West Salt Lake City, UT 84134 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>Unknown</u></p>
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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.216</div> <p>Nonpriority creditor's name and mailing address Vast Broadband 5100 South Broadband Lane Sioux Falls, SD 57108 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>Unknown</u></p>
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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.217</div> <p>Nonpriority creditor's name and mailing address Verizon Wireless # 485047954 Lehigh Valley, PA 18002-5505 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$9,677.00</u></p>
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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.218</div> <p>Nonpriority creditor's name and mailing address Vic'S Crane & Heavy Haul, Inc 3000 145Th Street East Rosemount, MN 55068 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$64,699.00</u></p>
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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.219</div> <p>Nonpriority creditor's name and mailing address Village of Mount Prospect 50 S Emerson St Mount Prospect, IL 60056 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2676</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>Unknown</u></p>
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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.220</div> <p>Nonpriority creditor's name and mailing address Wagstaff Crane Services LLC 4315 South Commerce Drive Murray, UT 84107 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$314,591.00</u></p>
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<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.221</div> <p>Nonpriority creditor's name and mailing address Wanhe Filtration, Inc 19 Clifford Street Detroit, MI 48226 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,040.00</u></p>
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3.222	Nonpriority creditor's name and mailing address Wanzek Construction, Inc. 4850 32Nd Avenue South Fargo, ND 58104 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200,000.00
<hr/>			
3.223	Nonpriority creditor's name and mailing address Werge Law LLC 2231 North Gaylord Street Denver, CO 80205 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,516.00
<hr/>			
3.224	Nonpriority creditor's name and mailing address Western Metal Products, LLC 2613 Highway 97 Ellensburg, WA 98926 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,485.00
<hr/>			
3.225	Nonpriority creditor's name and mailing address Woodward Inc 1000 East Drake Road Fort Collins, CO 80525 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,668.00
<hr/>			
3.226	Nonpriority creditor's name and mailing address Wright Express Po Box 639 Portland, ME 04104 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,000.00
<hr/>			
3.227	Nonpriority creditor's name and mailing address Wyoming Department of Revenue 122 W 25th St Suite E301 Cheyenne, WY 82002-0110 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.228	Nonpriority creditor's name and mailing address Xo Communications Services LLC Po Box 15043 Albany, NY 12212-5043 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,288.00

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3.229	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,390.00
	Zeifmans, LLP	<input type="checkbox"/> Contingent	
	201 Bridgeland Avenue	<input type="checkbox"/> Unliquidated	
	Toronto, Ontario M6A 1Y7	<input type="checkbox"/> Disputed	
	CANADA		
	Date(s) debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.230	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$14,532.00
	Zf Services LLC	<input type="checkbox"/> Contingent	
	777 Hickory Hills Drive	<input type="checkbox"/> Unliquidated	
	Vernon Hills, IL 60061	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.231	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$238,000.00
	Zf Wind Power Antwerpen Nv	<input type="checkbox"/> Contingent	
	Leonardo Da Vincilaan 1, 2650 Edege	<input type="checkbox"/> Unliquidated	
	Antwerp, Belgium 2650	<input type="checkbox"/> Disputed	
	BELGIUM		
	Date(s) debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Barack Ferrazzano Kirschbaum et al Roger Stetson and Nicholas Laird 200 W. Madison St., #3900 Chicago, IL 60606	Line <u>3.136</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Clark Hill PLC Timothy R. Herman 130 E. Randolph St., #3900 Chicago, IL 60601	Line <u>3.184</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Foster Graham Milstein & Calisher Steven Wienczkowski 360 S. Garfield St., 6th Floor Denver, CO 80209	Line <u>3.160</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	Fredrikson & Byron, P.A. 51 Broadway Suite 400 Fargo, ND 58102	Line <u>3.32</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	Fredrikson & Byron, P.A. Aron J. Frakes 200 S. Sixth Street, #4000 Minneapolis, MN 55402	Line <u>3.112</u> <input type="checkbox"/> Not listed. Explain _____	—
4.6	Law Office of Mark E. Abrams 1200 N. Ashland Avenue, #1 Chicago, IL 60622	Line <u>3.185</u> <input type="checkbox"/> Not listed. Explain _____	<u>Atty for Stemman Technik</u>

Debtor	<u>Suzlon Wind Energy Corp</u>	Case number (if known)	<u>21-07923</u>
	Name		
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.7	Lichtman Eisen Partners, Ltd. Marc Lichtman 134 N. LaSalle St., #750 Chicago, IL 60602	Line <u>3.81</u> <input type="checkbox"/> Not listed. Explain _____	—
4.8	Montgomery Little & Soran Jason Kennedy & Robin Jackson 5445 DTC Parkway, #800 Englewood, CO 80111	Line <u>3.162</u> <input type="checkbox"/> Not listed. Explain _____	—
4.9	Patrick Schuette Johnson, Blumberg & Assoc. 230 W. Monroe, Suite 1125 Chicago, IL 60606	Line <u>3.60</u> <input type="checkbox"/> Not listed. Explain _____	<u>Atty for Digging and Rigging</u>

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 19,267,588.38
5c.	\$ 19,267,588.38

Fill in this information to identify the case:

Debtor name Suzlon Wind Energy Corp

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) 21-07923

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest Coffee Machine

State the term remaining

List the contract number of any government contract

Aramark Refreshment Services
1851 Howard St.
Suite F
Elk Grove Village, IL 60007

2.2. State what the contract or lease is for and the nature of the debtor's interest Vehicle leases

State the term remaining

List the contract number of any government contract

Enterprise Fleet Management
PO Box 800089
Kansas City, MO 64180-0089

2.3. State what the contract or lease is for and the nature of the debtor's interest Forklift lease - total base value \$194,565
Contract End Date 3/14/2022

State the term remaining 10 months

List the contract number of any government contract

HYG Financial Services Inc.
800 Walnut Street
Des Moines, IA 50309

2.4. State what the contract or lease is for and the nature of the debtor's interest Guymon Oklahoma Facility

State the term remaining

List the contract number of any government contract

Kelsey White
3101 Castle Road Road
Unit 19
Oklahoma City, OK 73120

Debtor 1 Suzlon Wind Energy Corp

First Name

Middle Name

Last Name

Case number (if known) 21-07923

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest Printer leases

State the term remaining

List the contract number of any government contract

Konica Minolta
21146 Network Place
Chicago, IL 60673-1211

2.6. State what the contract or lease is for and the nature of the debtor's interest Hocking International - Pipestone Facility

State the term remaining

List the contract number of any government contract

Krista Carlsberg
PO Box 462785
Escondido, CA 92046-2785

2.7. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Michael Shanahan
c/o High Street Logistics
1S450 Summit Ave, #250
Villa Park, IL 60181

2.8. State what the contract or lease is for and the nature of the debtor's interest Postage Machine

State the term remaining

List the contract number of any government contract

Pitney Bowes Global Financial
27 Waterview Dr
Shelton, CT 06484

2.9. State what the contract or lease is for and the nature of the debtor's interest Port Corpus Christi

State the term remaining

List the contract number of any government contract

Priscilla Torres
222 Power St.
Corpus Christi, TX 78401

2.10. State what the contract or lease is for and the nature of the debtor's interest Triangle Plaza

State the term remaining

List the contract number of any

Steve Borzillo
c/o Alliance Partners HP
40 Morris Ave., #230
Bryn Mawr, PA 19010

Debtor 1 Suzlon Wind Energy Corp

First Name

Middle Name

Last Name

Case number (if known) 21-07923

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

Fill in this information to identify the case:

Debtor name Suzlon Wind Energy Corp

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) 21-07923

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 Ae- Rotor Holding Bv	Hengelo(Ov) The Netherlands Utrecht, The Netherlands 9999 AA THE NETHERLANDS	Exim Bank - London Branch	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2 Mr. Tulsi R. Tanti	One Earth, Opposite Magarpatta City Hadpsar Pune, Maharashtra 411028 INDIA	Exim Bank - London Branch	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.3 Suzlon Energy A/S	Bredskifte Alle 13 8210 Arhus V Denmark CVR - nr 28101120	Exim Bank - London Branch	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4 Suzlon Energy Limited	One Earth, Opposit Magarpatta City Hadapsar Pune, Maharashtra 411028 INDIA	Exim Bank - London Branch	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor Suzlon Wind Energy Corp Case number (if known) 21-07923

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.
Column 1: Codebtor *Column 2: Creditor*

2.5	Suzlon Wind Energy Nicaragua	Off. of consortium, Taboada & Assoc Avenida Bolivar #1947, Managua NICARAGUA	Exim Bank - London Branch	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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